ATTACHMENT - CARDIOVASCULAR SYSTEM SURGERY (proposed to be effective October 1, 2014)

							CURI	RENT	PROPOSED	
TOS	Procedure Code	Modifier	Long Description	Age Range	Non- Facility (N)/Facilit y (F)	Provider Type (PT) /Provider Specialty (PS)	Current Medicaid Fee	Current Adjusted Medicaid Fee	Proposed Medicaid Fee	Proposed Adjusted Medicaid Fee
2	37200		**	0-20	F		\$185.87	\$182.15	\$181.03	\$181.03
2	37200		**	21-999	F		\$177.02	\$173.48	\$172.41	\$172.41
2	37202		**	0-20	F		\$276.95	\$271.41	\$246.15	\$246.15
2	37202		**	21-999	F		\$263.76	\$258.48	\$234.43	\$234.43

*Type of Service (TOS)						
2	Surgery					

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